PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number
09/649811

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS (60)	87 minus 20= *	67
INDEPENDENT CLAIMS	18 minus 3 = *	15
MULTIPLE DEPENDENT CLAIM PRESENT		

	SMALL ENTITY TYPE ☐	OR	OTHER THAN SMALL ENTITY	
	RATE	FEE	RATE	FEE
BASIC FEE		345.00	OR	690.00
	X$ 9=		OR X$18=	1206
	X39=		OR X78=	1170
	+130=		OR +260=	260
	TOTAL		OR TOTAL	3326

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X$ 9=		OR X$18=	
	X39=		OR X78=	
	+130=		OR +260=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X$ 9=		OR X$18=	
	X39=		OR X78=	
	+130=		OR +260=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	X$ 9=		OR X$18=	
	X39=		OR X78=	
	+130=		OR +260=	
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: ___09/649871___

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101				345	690	=	690
Total Claims >20	203/103	87	-20 = 67	X	9	18	=	1206
Independent Claims >3	202/102	18	-3 = 15	X	39	78	=	1170
Mult. Dep Claim Present	204/104				130	260	=	260
Surcharge	205/105				65	130	=	130
English Translation	139							
								3456

TOTAL FEE CALCULATION

Fees due upon filing the application:

3456

Total Filing Fees Due = . $ _____

Less Filing Fees Submitted - $ _____

BALANCE DUE = $ _____

Marcia Gordon
Office of Initial Patent Examination

FORM OIPE-RAM-01 (Rev. 12/97)